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PTO/SB/01 (12-97)

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<b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION</b> (37 CFR 1.63)		Attorney Docket Number	005430.00002
		First Named Inventor	Rusing, Matthias
		<b>COMPLETE IF KNOWN</b>	
		Application Number	10/070,666
		Filing Date	March 8, 2002
		Group Art Unit	
		Examiner Name	

☐ Declaration Submitted with Initial Filing      OR      ☒ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**Nucleic Acid Which Is Obtained From Tetrahymena And Which Codes For A Delta-6-Desaturase, The Production Thereof And Use**

the specification of which (Title of the invention)

☐ is attached hereto OR

☒ was filed on (MM/DD/YYYY) **March 8, 2002** as United States Application Number or PCT International Application Number **10/070,666** and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 356(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
PCT/EP00/08778 199 43 270.8	PCT DE	09/08/2000 09/10/1999	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 120(c) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)

☐ Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

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**DECLARATION — Utility or Design Patent Application**

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 355(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.55 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
PCT/EP00/08778	September 8, 2000	

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02C attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transmit all business to the Patent and Trademark Office connected therewith: ☒ Customer Number **22910** OR ☐ Registered practitioner(s) name/registration number listed below

Please Customer Number Bar Code Label here

Name	Registration Number	Name	Registration Number

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☒ Customer Number or Bar Code Label **22910** OR ☐ Correspondence address below

Name			
Address			
Address			
City	State	ZIP	
Country	Telephone	Fax	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of this application or any patent issued thereon.

**Name of Sole or First Inventor:** ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))	Family Name or Surname		
<b>Matthias</b>	<b>Rusing</b>		
Inventor's Signature	Date		
<i>[Signature]</i>	<b>11.08.02</b>		
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City	State	ZIP	Country
<b>Koln</b>			<b>Germany</b>

☒ Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

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**DECLARATION**
**ADDITIONAL INVENTOR(S)**  
 Supplemental Sheet  
 Page 1 of 1

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))

Family Name or Surname

Thomas

Kiv

Inventor's  
Signature

Date

07.08.02

Residence: City

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Citizenship

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Post Office Address

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State

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Germany

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))

Family Name or Surname

Annette

Dominitzki

Inventor's  
Signature

Date

Residence: City

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Name of Additional Joint Inventor, if any:

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Given Name (first and middle (if any))

Family Name or Surname

Inventor's  
Signature

Date

Residence: City

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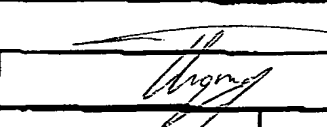
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**DECLARATION**

**ADDITIONAL INVENTOR(S)**  
**Supplemental Sheet**  
 Page 1 of 1

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))		Family Name or Surname			
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Inventor's Signature				Date	07.08.02
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City	Frankfurt am Main	State		ZIP	
				Country	Germany
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))		Family Name or Surname			
Annette		Dominitzki			
Inventor's Signature	x A. Dominitzki			Date	15/08/02
Residence: City	Klein-Winternheim	State		Country	Germany
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Post Office Address	55270				
City	Klein-Winternheim	State		ZIP	
				Country	Germany
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))		Family Name or Surname			
Inventor's Signature				Date	
Residence: City		State		Country	
Post Office Address					
Post Office Address					
City		State		ZIP	
				Country	

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